PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must

CI			Certificate	of Mai	ling or Transn	nission				
	JSTOME	K NO 850	IVID	ΕK	A her State addr trans	reby certify that is Postal Service essed to the Namitted to the U	this Fee(e with suf fail Stop SPTO (57	s) Trans Ticient p ISSUE 1) 273-2	mittal is being postage for first FEE address a 2885, on the da	deposited with the United class mail in an envelope above, or being facsimile te indicated below.
	220	330								(Depositor's name)
					-					(Signature)
										(Dute)
APPLICATION NO.	FILING DATE			FIRST NAMED INVENTOR			ATTO	RNEY D	OCKET NO.	CONFIRMATION NO.
10/618,734 TITLE OF INVENTION	07/15/2003 : ENCRYPTION APPA	RATUS		Hideo Sato				240264	4US6	7267
APPLN, TYPE	SMALL ENTITY	ISSUE FEE	DUE	PUBLICATION FEE I		PREV. PAID ISSUE F		EE TOTAL FEE(S) DUE		DATE DUE
nonprovisional	NO	\$140	0	\$300		\$0	\$0		\$1700	05/29/2007
EXAMINER		ART UNIT		- CLASS-SUBCLASS						
· · · · · · ·	PEESO, THOMAS R		!	713-164000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Oblon, Spivak, 2 McClelland, Mai 3 & Neustadt, P.C.						land, Maier
3. ASSIGNEE NAME A PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIG Sony Corp Please check the appropri	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE POTATION	ified below, no oletion of this fo	assignee orm is NO	data will appear on I' a substitute for filin (B) RESIDENCE: (6	the page and control of the page and control of the	atent. If an assassignment. and STATEO	R COUNT APAN	RY)		cument has been filed for up entity
4a. The following fee(s) are submitted: ✓ Issue Fee ✓ Publication Fee (No small entity discount permitted) ✓ Advance Order - # of Copies				4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Transmitted via EFS-Web. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).						
	SMALL ENTITY state	s. See 37 CFR		b. Applicant is not from anyone other t						R 1.27(g)(2). c assignee or other party in
Authorized Signature	Fred&B	sun_	I rademark	Office.		Date	ΑF	PR 1	9 2007	
Typed or printed name This collection of informan application. Confident submitting the complete this form and/or suggesti Box 1450, Alexandria, V		FR 1.311. The U.S.C. 122 and USPTO. Time den, should be NOT SEND F	information of the will vary sent to the FEES OR (on is required to obtain 1.14. This collection depending upon the Chief Information (COMPLETED FORM	n or r is est indiv Office	Registration etain a benefit limated to take idual case. Any ar, U.S. Patent a D THIS ADDR		_	h is to file (and plete, including amount of timfice, U.S. Depa Commissioner for	by the USPTO to process) g gathering, preparing, and ne you require to complete tunent of Commerce, P.O. or Patents, P.O. Box 1450,

Ŧ Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.